

REQUEST FOR PROPOSAL

Independent Employee Benefits Consulting for the

Town of Bethel

May 2017

**TOWN OF BETHEL
REQUEST FOR PROPOSAL
INDEPENDENT EMPLOYEE BENEFITS CONSULTING
FOR THE
TOWN OF BETHEL
Instructions to Bidders**

INTRODUCTION

Definition

The Town of Bethel will hereinafter be referred to, as the Town.

Intent

The Town is soliciting proposals from qualified firms to provide Employee Health Care Benefits Consulting Services. Consulting services shall include, but not be limited, to day-to-day benefit consulting, review and analysis of renewal offers from service providers and/or carriers and other administrative and labor related services. The intent is to have a fee based service for an Employee Health Care Benefits Consultant. The purpose of this RFP is to determine what services you can provide to the Town and how you would adapt your services for Bethel's specific needs. In addition, the Town is looking for new ideas to promote wellness and to provide incentives to reduce the costs for Employee Health Care Benefits for the Town.

The intent is to find a consultant that can assist the Town with the following areas (but not limited to these):

- Compliance with all appropriate state and federal regulations
- Assistance with Healthcare Reform regulations
- Two-way employee communications about Health Care benefits
- Collective Bargaining related to Employee Health Care benefits
- Procurement of health, dental, life and LTD insurance
- Health Risk Management (including: wellness programs, incentives, adjusted premiums based on wellness efforts, cost containment, and other similar ideas)

Calendar for RFP:

RFP Advertised	5/5/17
Questions due from Vendors	5 /12/17
Responses to Questions-Addendum	5/19/17
RFP Due Date	5/26/17 at 11 am
Interview of top Vendors	TBD
Award Date	Anticipated June 20, 2017

Background Information

The Town provides health insurance to about 124 employees (With Oxford the State Plan: 17 Family Coverage, 17 single plus 1 coverage and 21 single coverage), (With CtCare 38 Family Coverage, 9 single plus 1 coverage and 22 single coverage). Life insurance covers 105 town employees.

The Town has 4 unions. The Town financial system is managed by the Comptroller who reports to the First Selectman.

The current provider for the Town is Oxford, the State Plan for, and CtCare for 3 bargaining units with renewal starting on July1st. Current premium is about \$2.5 million for medical.

This contract is anticipated to be awarded July 1, 2017. All employee health benefits have a renewal date of July 1 of each year. For the fiscal year commencing on Town July 1, 2018 will be the responsibility of the new consultant selected under this RFP. The process for the next renewal starts as early as December 2017.

Employee Health Care Benefit Consulting and Monitoring

- Ensure accurate follow through on all negotiated contractual arrangements made between the Town and any administrators or insurance carriers utilized by the Town.
- Ensure that all arrangements with any administrator and/or insurance carriers are strictly adhered to.
- Provide current information on managed care delivery systems, including, PPO, HSA's and other current and emerging systems and any other general health care consulting advice.
- Perform a rate analysis, evaluate and negotiate all renewals for each fiscal year.
- Monitor and maximize management information available through all providers.
- Intervene and resolve claim issues.
- Monitor claim performance according to any performance standards contracts the Town may have with any provider. Recommend the establishment of additional performance standard agreement with vendors if there are service problems.
- Monitor and coordinate services including: claim processing, trend analysis, booklet, identification cards and administrative/premium payments.
- Provide consulting advice for union negotiations before, during and after the negotiations to include the impact of changing health care benefit levels and advice on implementing the new changes.

- Assist and provide recommendations in order to fulfill compliance requirements of State and Federal regulations, statutes and mandates. COBRA, HIPAA, Healthcare Reform, etc.)
- Provide routine group benefit and general health care consulting advice. Assist the Town in establishing a strategic plan for employee health care benefits. Provide ongoing analysis and planning of new approaches to employee health care benefits. Take the initiative to bring new ideas to the Town. Work with the Town team to develop and provide policy direction.
- Provide ongoing analysis of plan designs, cost containment strategies and cost sharing alternatives available to the Town while maintaining integrity of union contracts.
- Develop strategies for implementation of new health care benefit programs to employees through two-way communication and educational programs. Assist employees in decisions related to their employee health care benefits during open enrollment. Coordinate employee communication and conduct employee information meetings as new programs are implemented and about existing benefits and how to use them properly.
- Inform the Town of changing legislation and legal decisions affecting employee health care benefits. Advise and discuss methods to comply with these changes.
- Assist Town implementation of wellness programs. Provide assistance, materials and resources for wellness program, employee education materials for healthy lifestyles and participation in health fairs.
- Provide advice on data practices, records retention and privacy issues
- Assist the Town with its budget planning for employee health care benefit costs by providing renewal estimates not later than Mid December for Health Insurance with updated rate cost in March of each year.
- Provide a team of servicing representatives available to the Town on an on- going basis. One member of the Team should be a Certified Insurance Consultant (CIC)
- Prompt response to questions and requests is an absolute requirement. It is expected that there will be more than one individual within the firm capable of addressing possible concerns of the Town.
- Analyze and report utilization trends and cost with recommendations.
- Prepare an Annual Stewardship Report for the Town including complete accounting of fees and/or commissions earned on the account, observations on relevant changes in the health care insurance market, view on loss exposures facing the Town, loss control activities and insurance health care policy summaries. This report should be available within 30 days after fiscal year end and presented to the Comptroller.

PROPOSAL EVALUATION

Selection Criteria

The following criteria will be used, without limitation, in determining the successful Provider:

- The background experience, and financial strength of the Proposer in providing similar services elsewhere, including the level of experience in working with other municipalities of similar size, and the quality of services performed.
- The specific background, education, qualifications, and relevant experience of the individuals designated to provide services, especially those of the project manager, and documentation of relevant and pertinent training and accreditations of each member of the team.
- Competitiveness of proposed fee. In accordance with the Bethel Purchasing Policy the lowest qualified responsible bidder will be selected. That policy defines the Lowest Qualified Responsible Bidder as the bidder offering the lowest price among those bidding who possesses the skill, ability, and integrity necessary for the performance of the work based on objective criteria considering, amongst other factors, past performance and financial responsibility. The Town reserve the right to negotiate fees with the selected Proposer. See general conditions
- The Proposer's responsiveness and compliance with the RFP requirements and conditions to provide the services requested.
- A review of references that were provided in the Proposal submitted.
- Administration of Prior Contracts.

Selection Process

- Proposals will be evaluated based upon the criteria and/or factors of evaluation listed in the Request for Proposal.
- The Town may elect to have the proposals evaluated by a committee. If deemed necessary by the committee, the Town reserves the right to select from the proposals received and schedule interviews and oral presentations.
- The Town shall select that responsible and responsive Proposer whose proposal is determined by the Town to be the best suited, most advantageous, and provides the greatest overall benefit to the Town on the basis of the criteria and/or factors of evaluation listed. The Town expressly reserve the right to negotiate with the selected Proposer prior to an award of any contract pursuant to this Request for Proposal.

- The Town reserve the right to reject any and all proposals and to waive any informalities or technical defects in any proposal. Non-selection of any proposal will mean that another acceptable proposal was deemed to be more advantageous to the Town or that no proposal was accepted.

Proposers whose proposals are not accepted will be so notified. Notification of non-selected proposals will be devoid of any criticism of the proposal and of any implication that the proposal or proposed equipment was deficient.

Collusion

Any act or acts of misrepresentation or collusion shall be a basis for disqualification of any proposal or proposals submitted by such persons guilty of said misrepresentation or collusion. In the event that the Town enters into a contract with any bidder who is guilty of misrepresentation or collusion and such conduct is discovered after the execution of said contract, the Town may cancel said contract without incurring liability, penalty or damages. Non-Collusion form must be completed.

SUBMISSION OF PROPOSAL

All proposals must be received by 11AM, May 26, 2017. One original and Four (4) copies plus an electronic version of the proposal shall be submitted to:

Town of Bethel
Finance Department
1 School Street
Bethel, CT 06801

All proposals shall be opened publicly and recorded. Proposers may be present at the opening; however, there will be no public reading of Proposals. Proposals received later than time and date specified will not be considered.

Questions

Questions about this RFP may be directed to Mr. Robert Kozlowski, Bethel Town Comptroller 203-794-8563, kozlowskib@bethel-ct.gov by 6/8/15. All information given by the Town except by written addenda shall be informal and shall not be binding upon the Town nor shall it furnish a basis for legal action by any Proposer or prospective Proposer against the Town.

Answers to these questions will be addressed in an addendum, which will be issued, by the Town and mailed/emailed to each known Proposer. No addendum will be issued less than five (5) calendar days before the scheduled RFP opening unless it is to postpone the RFP.

All proposals shall remain firm and cannot be withdrawn for a period of 90 days after receipt of proposals.

Packaging

An **original** and four (4) copies of the proposal shall be placed in a sealed envelope and an electronic copy of the proposal, bearing the name and address of the Proposer and clearly marked with the words, INDEPENDENT EMPLOYEE BENEFITS CONSULTING RFP

PROPOSAL CONTENT

The Request for Proposal is intended to provide interested Proposers with uniform information concerning the conditions for submitting proposals. To that extent this RFP presents detailed system requirements. Proposers must examine all information and materials contained in this RFP. **Failure to do so will be at the Proposer's risk.** In response to the RFP, Proposers shall adhere to the established format. By doing so, comparable data will be provided for Town review and analysis. The Proposal shall contain the following sections, in order and format described.

Submittal Letter

A letter of transmittal addressed to **Mr. Mathew Knickerbocker, First Selectman**, which includes a statement by the Proposer accepting all terms and conditions and requirements contained in the RFP. The letter should also include a brief discussion of the Proposer's background, experience and ability to perform this contract. It must also include information on all sub-consultants proposed for the contract (if any). Also to be included is a listing of all- municipal or private sector clients for whom recent (past 3 years only) health benefits consulting services were performed in the State of Connecticut as well as the nature of the project. Submittal letter should indicate: appropriate contact person for this project with name, address, phone, email; Connecticut office location; and name of authorized person who can enter into a contract with the Town.

Detailed Proposal Including:

Project Summary: Provide a written summary in sufficient detail to demonstrate an understanding of the scope of the project and the services required.

Experience: Provide a detailed written summary of the Proposer's experience, qualifications, financial strength, and capability in providing similar services elsewhere. The Proposer should also include three (3)

references from similar engagements for Connecticut Municipal clients along with individual names and telephone numbers.

Technical Competence: Explain why you think your firm has the technical competence to service the Town of Bethel based on the scope of services described. Also give examples of cost containment programs you have recommended or implemented, including documented savings

Staff Plan: Identify key staff that will provide any portion of the services required under the contract. For each identified individual, provide background and experience, and areas and levels of responsibility.

Services Expected of the Town: Define the nature and scope of all services expected to be provided by the Town.

Management Plan: Describe the project management systems currently in place and how it will function to ensure the timely completion of employee benefit consulting services and how you will develop a strategic plan for the Town to address employee benefits currently and in the future.

Transition Plan: If the Town changes consultants as a result of this RFP the successful firm will need to have a transition plan. Proposing firms should describe their transition plan.

Prior Contracts: Have you been involved in any litigation or arbitration in the past five (5) years with any client you were under contract to provide professional services? If yes, please provide the name of the client, a description of the disagreement and the outcome.

Forms: Complete the attached forms found in the Appendix A (check off list); Appendix B - Compensation Schedule Form; Appendix C - Non-Collusion Form and Appendix D – Insurance Form

Exceptions/Alternatives

Proposers wishing to take any exceptions to any requirement in the RFP shall state and explain such exceptions in their proposal. The Town may accept proposals which take exception and/or alternatives to any requirements in this RFP. Any exception/alternative must be clearly delineated and cannot materially affect the substance of this Request for Proposal.

Cost Proposal

Proposers are required to submit their full service lump sum fee and expected schedule of payment to perform employee benefits consulting

services for three fiscal years. All costs associated with the performance of these services must be clearly delineated and incorporated in the lump sum fee proposed.

The Town reserves the right to negotiate fees and payment schedules with the selected Proposer.

Proposers must disclose all expected and potential payments, commissions or remuneration of any type (direct or indirect), which might be associated with the Proposer receiving this award.

Proposer must also disclose any such payments during the time of the contract to the Town and credit such payment towards the fee paid by the Town.

TERMS & CONDITIONS

The initial term of the contract will be for one year beginning July 1, 2017. The Town shall have the option to renew annually, unless written notice is provided to cancel within 2 months of the expiration date, under the same terms and conditions, subject to appropriation of funds.

Contract Management

The First Selectman or his /her duly authorized representative will manage the contracts for the Town.

Proposals

The Town will not be liable for costs incurred in the preparation of the response to this RFP or in connection with any presentation before a Selection Committee. Proposals submitted must be bound, paginated, indexed and numbered consecutively and the original proposal must be clearly identified as such.

All proposal submissions and materials become property of the Town and will not be returned.

Proposers to this RFP are hereby notified that all proposals submitted and information contained therein and attached thereto shall be subject to disclosure under the Freedom of Information Act.

Conditions

Proposers to this RFP will be expected to adhere to the following conditions and must make a positive statement to that effect in its proposal submitted:

Have sufficient reserve personnel to assure task continuity and completion of work in a timely manner.

Agree that all work produced under this agreement will become property of the Town and that the Town shall have the right to use any/or all of the information obtained for use it deems appropriate.

The firm will accept and follow direction from the Town and specifically, the First Selectman & the Comptroller.

Agree to conform to State and Federal Regulation governing Health Benefits Administration.

Agree to conform to all applicable laws and ordinances and statutes of the Federal Government, State of Connecticut and the Town.

Engagement Team

The key personnel assigned to this engagement are considered essential to the work being performed. Substitutions may only be made upon mutual agreement between the Town and the selected firm.

Indemnification and Insurance

The firm selected shall indemnify, defend, and save the Town harmless from liability in any manner of claims, lawsuits, and damages for any type of losses due to its work operations for the Town. Specific requirements for insurance are contained in Appendix D.

Additional Information

Information may be provided to potential Proposers for the purpose of clarification to assure full understanding of and responsiveness to the Request for Proposal's requirements through the addendum. Prospective Proposers shall be afforded fair and equal treatment with respect to access to additional information and revision of proposals.

TOWN OF BETHEL, CONNECTICUT GENERAL CONDITIONS

1. RECEIPT OF PROPOSALS

Proposals shall be received at the Finance Department Room , Town Hall, 1 School Street Bethel, Connecticut 06801 until the time and date as shown in the Invitation To Bid.

2. PREPARATION OF PROPOSALS

The proposal forms shall be furnished by the Town of Bethel with all specifications, and the bidder is required to use the form and submit the proposal intact to the Finance Department. All blank spaces must be filled in as noted in ink. No changes shall be made in the forms.

The bidder shall sign his proposal in the blank spaces provided for this purpose. If the proposal is made by a partnership or corporation, the name and address of the partnership or corporation shall be indicated together with the names and addresses of the partners or officers. If the proposal is made by a partnership, it must be acknowledged by one of the partners; is made by a corporation, by one of the officers.

3. SUBMISSION OF PROPOSALS

Each proposal submitted must be enclosed in a sealed envelope which is clearly marked with the contract to which it refers. This envelope shall then be placed in an outer envelope which shall be securely sealed and addressed to the Finance Department , Town Hall, 1 School Street, Bethel, Connecticut 06801. It shall bear the name and address of the bidder and the designation of the contract to which the proposal refers.

4. METHOD OF AWARD

Purchase Orders (Award) will be issued as promptly as possible after July 1, 2017 after the selection has been made by the Town.

5. EXEMPTION FROM TAX

Purchases made by the Town of Bethel are exempt from payment of Federal Taxes and Connecticut Sales and Uses Taxes. Such tax must not be included in the bid price of all items or materials furnished to the Town.

6. NOTICE OF AWARD

Acceptance of Bid will be by Purchase Orders in writing, signed by an officer of the Town and mailed to the address designated in the Proposal. After receipt of the Purchase Orders, the Contractor(s) will forward a formal acknowledgement to the Purchasing Office of the Finance Department of the Town.

7. OBLIGATION OF THE BIDDER

At the time of the opening of Bids, each Bidder will be presumed to have bid to the Specifications, and to have read and to be thoroughly familiar with the Specifications and Conditions and no allowance will be made for failure to have done so.

8. PAYMENT

Payment shall be made after completion of the required accepted work, within thirty (30) days when an invoice is rendered by the Vendor for the amount due.

9. INSURANCE

A. LIABILITY INSURANCE

Contractor shall, at its own cost and expense, procure and maintain Comprehensive General Liability Insurance, Comprehensive Auto Liability Insurance, and Comprehensive Catastrophe Liability Insurance, as well as Worker's Compensation Insurance as required by the appropriate Workers' Compensation Law or Act. All insurance shall be carried with insurers authorized to do business in the State of Connecticut and evidence of insurance, with adequate limits of liability, shall be furnished all parties to the contract. Such evidence shall be in the form of a formal certificate of insurance properly executed by a licensed representative of the participating insurers and must contain a clause granting at least thirty (30) days prior written notice to the certificate holder of intent to affect cancellation, non renewal, or other material change which may have an adverse effect on the policies of insurance referred to in the certificate. The interests of the certificate holder must be added to the aforementioned liability policies of insurance as an additional insured.

MINIMUM COVERAGES AND LIMITS OF LIABILITY REQUIRED:

COMPREHENSIVE GENERAL AND AUTO LIABILITY INSURANCE

Combined single limit of liability as respects bodily injury, personal injury and property damage liability as follows:

COMPREHENSIVE GENERAL LIABILITY:

\$1,000,000. PER OCCURRENCE/AGGREGATE

COMPREHENSIVE AUTOMOBILE LIABILITY:

\$1,000,000. PER OCCURRENCE

COMPREHENSIVE CATASTROPHE LIABILITY: (UMBRELLA)

\$2,000,000. PER OCCURRENCE/AGGREGATE

The above minimum limits of liability shall apply to all premises – operations, elevators, independent contractors, products – completed operations, contractual liability, broad form property damage, XCU coverage extension, employee as additional insured's, automobiles – owned and non owned, including hired automobiles, and other coverage's which may be required to satisfy the parties to the contract.

Each policy of insurance provided as set forth above, General Liability, Automobile Liability and Catastrophe Liability shall include a waiver of subrogation in favor of the Town of Bethel and shall name the Town of Bethel as an additional insured. Such certificates of Insurance acceptable to the Town of Bethel shall be delivered to the Town of Bethel prior to the commencement of the work and kept in force throughout the term hereof. The certificates are subject to final approval by the Town's Insurance agent as to form and substance and may require changes in the types of coverage and limits

In every instance coverage must apply both on and away from the premises referred to in the contract, and apply to all operations related thereto.

B. PROPERTY INSURANCE

Contractor shall, at its own cost and expense, assume all responsibility for equipment and other property to be installed until such equipment or other property is approved satisfactorily installed and accepted by owner.

Contractor will also assume full responsibility for his and his employees own tools and equipment as well as for those tools and equipment of his subcontractors and their employees.

Contractor shall purchase and maintain, in an insurer authorized to transact business in the state of Connecticut and of recognized financial standing, best rating "A" or better, Builders Risk Property Insurance to include the interests of the owner, contractor, subcontractors, and sub subcontractors in the work, in an amount representing the completed value (non reporting form) of the project and all materials, equipment and supplies which are intended to become a permanent part of the project including subsequent modifications thereto, on a replacement cost basis.

C. PROFESSIONAL LIABILITY INSURANCE

If applicable for the services to be provided, Contractor shall provide Professional Liability

insurance with a combined single limit of \$2,000,000, aggregate and provide a certificate of insurance acceptable to the Town of Bethel prior to the commencement of the work and kept in force throughout the term hereof.

D. SUBCONSULTANTS & SUBCONTRACTORS

All of the above insurance requirements shall also apply to all sub consultants and/or subcontractors of the Contractor and Contractor shall not allow any sub consultants and/or subcontractors to commence work until the sub consultants and/or subcontractors insurance has been so obtained and approved by the Town of Bethel.

10. ACCEPTANCE WAIVER

The Town of Bethel reserves the right to waive any defects and informality in the bidding or in any bid, to reject any or all bids for any reason

APPENDIX A
FORMS TO BE COMPLETED (Check off List)

Question	Yes	No
Is your firm licensed in the State of Connecticut?		
Has your firm ever been suspended, warned or fined by the Connecticut Insurance Department? If yes please explain		
Is your firm currently in arrears on payments of insurance premiums to any Insurance Company?		
Does your firm have two or more qualified persons to handle the Town accounts		
Does your firm have two or more qualified persons to handle the Town account with 10 years of experience in employee benefits?		
Do you carry the appropriate insurance as indicated in Appendix D		
Have you worked with at least two accounts with premiums over \$5 million or more (within the last three (3) years)		
Have you worked with at least 3 political subdivisions of the State of Connecticut (i.e. municipality, school system public authority, etc)		
Please describe up to three accounts you have handled for political subdivisions. List type of Account, Type of Coverage written/handled and premium(s) –You may attach a separate list 1 2 3		
List three references from current accounts - Provide Contact Name, Title, Agency, telephone number, and services provided. 1 2 3		
Have you implemented cost containment efforts for your clients? If so, Please provide 3 examples and the savings achieved (you may attach a Separate list)		

Please list those companies you would approach for the Town Medical, Dental, Prescription Insurance and your annual premium volume with each company		
Please list those companies you would approach for the Town Life Insurance and your annual premium volume with each company		
What type of wellness initiatives have you implemented for other clients, please describe (you may attach a separate list)		
Have you developed RFP's for Clients to receive comparative prices for Health Insurance		
Do you agree to disclose, in writing, all compensation received by you or your firm in connection with the placement or servicing of insurance for the Town from any source other than the Town?		
Do you agree to follow all HIPAA laws when dealing with Town Information?		
Please list the number of employees in your company?		
Please list all office locations for your company near Bethel		
How many staff will you assign to this account? Please list name and Title		
Please attach your standard Contract for these types of services		

APPENDIX B
COMPENSATION SCHEDULE
FORM

Please set forth your annual Fees to perform all consulting services indicated in the Scope of Services:

Town of Bethel

Year 1 _____

Year 2 _____

Year 3 _____

Proposers must disclose all expected and potential payments, commissions or remuneration of any type (direct or indirect), which might be associated with the Proposer receiving this award.

Authorized Signature _____ Date _____

Print Name _____

Print Title _____

Company Name _____

Address _____

City, State, Zip _____

Phone/Fax _____

Email _____

APPENDIX C

Town OF Bethel

NON-COLLUSIVE STATEMENT

Bid for: _____

The undersigned bidder, having fully informed themselves regarding the accuracy of the statements made herein certifies that:

- a. The bid has been arrived at by the bidder independently and has been submitted without collusion with, and without any agreement, understanding, or planned common course of action with any other vendor of services described in the invitation to bid designed to limit independent bidding or competition, and;
- b. The bidder has not communicated the contents of the bid to any person not an employee or agent of the bidder, and will not be communicated to any such person prior to the official opening of the bid.

The undersigned bidder further certifies that this statement is executed for the purpose of informing the Town of Bethel to consider the bid and make an award in accordance therewith.

Please complete & sign

Legal Name of Bidder	
Business Address	
Name & Title of Authorized agent	
Signature	
Date	
Phone # & Fax #	

APPENDIX D

Town of Bethel Benefits Consultant Insurance Requirements

INSURANCE REQUIREMENTS:

Based upon the outcome of this process, the final chosen consultant shall procure and maintain insurance against claims for injuries or losses to persons or property that are alleged to have arisen in connection with activities of the consultant and any agents, representatives, subcontractors or employees. Insurance companies must be licensed by the State of Connecticut or otherwise acceptable to The Town. The cost of such insurance, including required endorsements or amendments, shall be the sole responsibility of the consultant. Full disclosure of any nonstandard exclusion is required for all required coverage.

Each policy of insurance provided as set forth above, General Liability, Automobile Liability and Catastrophe Liability shall include a waiver of subrogation in favor of the Town of Bethel and shall name the Town of Bethel as an additional insured. Such certificates of Insurance acceptable to the Town of Bethel shall be delivered to the Town of Bethel prior to the commencement of the work and kept in force throughout the term hereof. The certificates are subject to final approval by the Town's Insurance agent as to form and substance and may require changes in the types of coverage and limits

In every instance coverage must apply both on and away from the premises referred to in the contract, and apply to all operations related thereto.

It is further agreed that the Consultant shall provide The Town with a thirty (30) day notice of cancellation, in advance of the retroactive date, and/or non-renewal.

A. LIABILITY INSURANCE

Contractor shall, at its own cost and expense, procure and maintain Comprehensive General Liability Insurance, Comprehensive Auto Liability Insurance, and Comprehensive Catastrophe Liability Insurance, as well as Worker's Compensation Insurance as required by the appropriate Workers' Compensation Law or Act. All insurance shall be carried with insurers authorized to do business in the State of Connecticut and evidence of insurance, with adequate limits of liability, shall be furnished all parties to the contract. Such evidence shall be in the form of a formal certificate of insurance properly executed by a licensed representative of the participating insurers and must contain a clause granting at least thirty (30) days prior written notice to the certificate holder of intent to affect cancellation, non renewal, or other material change which may have an adverse effect on the policies of insurance referred to in the certificate. The interests of the certificate holder must be added to the aforementioned liability policies of insurance as an additional insured.

MINIMUM COVERAGES AND LIMITS OF LIABILITY REQUIRED:

COMPREHENSIVE GENERAL AND AUTO LIABILITY INSURANCE

Combined single limit of liability as respects bodily injury, personal injury and property damage liability as follows:

COMPREHENSIVE GENERAL LIABILITY:

\$1,000,000. PER OCCURRENCE/AGGREGATE

COMPREHENSIVE AUTOMOBILE LIABILITY:

\$1,000,000. PER OCCURRENCE
COMPREHENSIVE CATASTROPHE
LIABILITY: (UMBRELLA)

\$2,000,000. PER OCCURRENCE/AGGREGATE

The above minimum limits of liability shall apply to all premises – operations, elevators, independent contractors, products – completed operations, contractual liability, broad form property damage, XCU coverage extension, employee as additional insured's, automobiles – owned and non owned, including hired automobiles, and other coverage's which may be required to satisfy the parties to the contract.

In every instance coverage must apply both on and away from the premises referred to in the contract, and apply to all operations related thereto.

B. PROPERTY INSURANCE

Contractor shall, at its own cost and expense, assume all responsibility for equipment and other property to be installed until such equipment or other property is approved satisfactorily installed and accepted by owner.

Contractor will also assume full responsibility for his and his employees own tools and equipment as well as for those tools and equipment of his subcontractors and their employees.

Contractor shall purchase and maintain, in an insurer authorized to transact business in the state of Connecticut and of recognized financial standing, best rating "A" or better, Builders Risk Property Insurance to include the interests of the owner, contractor, subcontractors, and sub subcontractors in the work, in an amount representing the completed value (non reporting form) of the project and all materials, equipment and supplies which are intended to become a permanent part of the project including subsequent modifications thereto, on a replacement cost basis.

C. PROFESSIONAL LIABILITY INSURANCE

If applicable for the services to be provided, Contractor shall provide Professional Liability insurance with a combined single limit of \$2,000,000, aggregate and provide a certificate of insurance acceptable to the Town of Bethel prior to the commencement of the work and

kept in force throughout the term hereof.

D. SUBCONSULTANTS & SUBCONTRACTORS

All of the above insurance requirements shall also apply to all sub consultants and/or subcontractors of the Contractor and Contractor shall not allow any sub consultants and/or subcontractors to commence work until the sub consultants and/or subcontractors insurance has been so obtained and approved by the Town of Bethel.

Please list any exceptions to the above insurance requirements:

We have read and understand the above listed insurance requirements and will provide the appropriate insurance certificates if awarded this contract

Signature _____ **Date** _____